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Bib Data Sheet

CONFIRMATION NO. 2046

SERIAL NUMBER 10/631,073	FILING DATE 07/31/2003 RULE	CLASS 204	GROUP ART UNIT 1746	ATTORNEY DOCKET NO. S-99,905
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APPLICANTS

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** CONTINUING DATA *****

None BFB

** FOREIGN APPLICATIONS *****

None BFB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 10/28/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NM	SHEETS DRAWING 4	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>BFB</i>	Initials	

ADDRESS

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TITLE

Oxygen-consuming chlor alkali cell configured to minimize peroxide formation

FILING FEE RECEIVED 440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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